

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	KH	70891	10/13
O.I.P.E. CLASSIFIER		61230	10-18-99
FORMALITY REVIEW	RS		10-27

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	
Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
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47	✓
48	✓
49	✓
50	✓

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
 staple additional sheet here

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